

BEST AVAILABLE COPY

CLASSIFICATION
CONFIDENTIAL

NAME TRACE REQUEST FORM

Date: _____

Ref/Control No.: _____

Date Due: _____

To : DAD _____ 513th _____ X A-2 _____ X OSI _____ X USAREUR
CENTRAL X
REGISTRY

From: ONI _____ BIV _____ BND _____ ASBW _____
DAD, Main _____

I. 1. NAME: _____ SCHNEIDER _____ Andreas _____
Last First Middle

2. Aliases/Variants/Maiden Name: _____

3. Date of Birth: 11 March 1903 4. Place of Birth: Welden, W. Germany

5. Citizenship: a. Present _____ b. Previous _____

6. Present Residence: _____

7. Past Residences: _____

8. Present Employment (Occupation): _____

9. Past Employment: _____

10. Additional Information: _____

II. Agencies Previously Traced by Requestor and Dates. DAD _____ 66th _____ 513th _____

A-2 _____ OSI _____ ONI _____ BIV _____ BND _____ ASBW _____

Other (Specify) _____

III. Reason for Trace Request _____ of security interest to the BND

RESULTS OF RECORD SEARCH

Date: _____

- ☐ The Files of this organization reflect no record on Subject.
☐ The Files of this organization reflect the following information:

DOWNGRADED AT 12 YR INTERVALS:
NOT AUTOMATICALLY DECLASSIFIED.
DOD DIR 6200.10

(Use Reverse Side for Additional Details)

NT-1 (Rev 12-67)

CLASSIFICATION
CONFIDENTIAL

Initials

DECLASSIFIED AND RELEASED BY
CENTRAL INTELLIGENCE AGENCY
SOURCE METHODS EXEMPTION 3B2B
NAZI WAR CRIMES DISCLOSURE ACT
DATE 2003 2006